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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for nple, your driver's use or passport). g your picture tification to your ting with the trustee.	Donald First name A. Middle name Toutant Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-7698	

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Case number (if known)

Debtor 1 **Donald A. Toutant**

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
		EINs	EINs		
5.	Where you live	10 Field Point Rd.	If Debtor 2 lives at a different address:		
		Montgomery, IL 60538 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Kendall County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 **Donald A. Toutant**

•ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
3.	How you will pay the fee	•	about how yo	u may pay. Typ attorney is subr	en I file my petition. Pleatically, if you are paying the nitting your payment on y	ne fee yourself, you ma	ay pay with cash, cashie	r's check, or money	
					allments. If you choose (Official Form 103A).	this option, sign and at	ttach the Application for	Individuals to Pay	
			I request that but is not req	it my fee be wa uired to, waive y	ived (You may request the cour fee, and may do so only our fee, and may do so only our fee, are unable to pay the court fee.	only if your income is le	ess than 150% of the off	icial poverty line that	
					Chapter 7 Filing Fee Waiv				
).	Have you filed for bankruptcy within the	■ No							
	last 8 years?	□ Ye							
			District				·		
			District		When _ When		Case number		
			District		winen		Case number		
10.	Are any bankruptcy cases pending or being	■ No)						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y€	es.						
			Debtor			F	Relationship to you		
			District		When _	(Case number, if known		
			Debtor			-	Relationship to you		
			District		When _	(Case number, if known		
11.	Do you rent your residence?	■ No	Go to l	ine 12.					
	. Jointon .	□Y€	es. Has yo	ur landlord obta	ined an eviction judgmer	nt against you and do y	you want to stay in your	residence?	
				No. Go to line	12.				
				Yes. Fill out <i>Ini</i> bankruptcy pet	tial Statement About an I ition.	Eviction Judgment Aga	ainst You (Form 101A) a	nd file it with this	

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Document Page 4 of 63 Case number (if known) Debtor 1 Donald A. Toutant Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Where is the property?

Number, Street, City, State & Zip Code

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 **Donald A. Toutant**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Donald A. Toutant Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donald A. Toutant Signature of Debtor 2 **Donald A. Toutant** Signature of Debtor 1 Executed on February 15, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Donald A. Toutant Page 7 of 63 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph R. Ramos	Date	February 15, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Joseph R. Ramos		
Law Office Of Joseph R. Ramos Firm name		
340 N. Lake Street		
Aurora, IL 60506 Number, Street, City, State & ZIP Code		
Contact phone (630) 896-7261	Email address	joseph@jramoslaw.com
6208195 - Illinois		
Bar number & State		

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Document Page 8 of 63 Fill in this information to identify your case: Debtor 1 **Donald A. Toutant** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	
		Value o	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,900.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,900.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	15,133.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,315.17
	Your total liabilities	\$	63,448.17
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,007.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,204.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Donald A. Toutant Document Page 9 of 63
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,732.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 17-04280 Doc 1 Filed 02/15/17 Entered 02/15/17 08:42:58 Desc Main Document Page 10 of 63 Fill in this information to identify your case and this filing: Debtor 1 **Donald A. Toutant** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Sentra Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Debtor 2 only Current value of the Current value of the 65000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another **Good condition** \$5,350.00 \$5,350.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,350.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Donald A. Toutant Case number (if kno	wn)
■ Yes	. Describe	
	Two dressers, bed, one TV	\$300.00
□ No	 conics coles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; must including cell phones, cameras, media players, games describe Desktop computer; printer	sic collections; electronic devices
	Desktop computer; printer	<u></u>
Examp ■ No	 ibles of value oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, of other collections, memorabilia, collectibles Describe 	coin, or baseball card collections;
Examp ■ No	nent for sports and hobbies bles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano musical instruments . Describe	pes and kayaks; carpentry tools;
■ No	ms uples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	es sples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Misc. wearing apparel	\$200.00
■ No □ Yes	ry pples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gen Describe arm animals pples: Dogs, cats, birds, horses	ns, gold, silver
■ No □ Yes	. Describe	
■ No	ther personal and household items you did not already list, including any health aids you did not list. Give specific information	ıt
15. Add	the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$650.00
Part 4: D	escribe Your Financial Assets	
Do you o	wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

		Case 17	-04280	Doc 1	Filed 02/15/17 Document	Entered 02/15/17 08:42:58 Page 12 of 63_	Desc Main
De	ebtor 1	Donald A. 1	outant		Document	Case number (if known)	
	■ No	, ,	·		our home, in a safe depo	osit box, and on hand when you file your petition	on
17.	Examp				I accounts; certificates of ounts with the same ins	of deposit; shares in credit unions, brokerage h titution, list each.	nouses, and other similar
	□ No ■ Yes				Institution r	name:	
			17.1.	Checking		ver Credit Union: Checking - \$0; (negative) \$25.00	\$0.00
	Examp ■ No □ Yes		s, investmer	nt accounts wi	th brokerage firms, mor suer name:	ney market accounts orporated businesses, including an interes	it in an LLC, partnership, and
	■ No	renture Give specific in		bout them e of entity:		% of ownership:	
	Negoti Non-ne ■ No	iable instrument	s include pe ments are the formation at	ersonal check nose you canr	negotiable and non-no s, cashiers' checks, promot not transfer to someone	egotiable instruments missory notes, and money orders. by signing or delivering them.	
	Examp ■ No	ment or pensio oles: Interests in List each accou	IRA, ERISA	A, Keogh, 401 ly.		s accounts, or other pension or profit-sharing	plans
22.	Your s		d prepayme ed deposits	you have ma		tinue service or use from a company ctric, gas, water), telecommunications compan	nies, or others
					Institution r	name or individual:	
	Annuit ■ No □ Yes	,	·	c payment of and descripti		r life or for a number of years)	
24.	26 U.S. ■ No	C. §§ 530(b)(1),	529A(b), a	nd 529(b)(1).		ogram, or under a qualified state tuition pro	
25	☐ Yes					g listed in line 1), and rights or powers exe	
	■ No	Give specific in			ity (otner than anythin	y nsieu in nne 17, and rights or powers exe	icisable for your benefit
	Patent	s, copyrights, t	rademarks	, trade secre	ts, and other intellecturoceeds from royalties a	ual property and licensing agreements	

Official Form 106A/B Schedule A/B: Property page 3

 \square Yes. Give specific information about them...

		Case	17-04280	Doc 1	Filed 02/15/17 Document	Entered 02/15/17 08:42:58 Page 13 of 63	Desc Main
De	btor 1	Donald	A. Toutant		Document	Case number (if known)	
	Exam _i ■ No	<i>ples:</i> Buildir	ises, and other ng permits, exclu	isive licenses		n holdings, liquor licenses, professional licens	ses
Мс	oney or	property o	wed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	funds owe	-	bout them, inc	cluding whether you alre	ady filed the returns and the tax years	
		•					
				Anti	cipated 2016 tax refu	und	\$2,500.00
	Exam _i ■ No	•	lue or lump sum	3 7. 1	usal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement
	Exam _i ■ No	<i>ples:</i> Unpaid benefi	omeone owes y d wages, disabili its; unpaid loans ific information	ity insurance		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
			rance policies n, disability, or life	e insurance; ł	health savings account (HSA); credit, homeowner's, or renter's insura	nce
	■ Yes.	Name the i		any of each p pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
					ance - \$25,000 death esent cash value	ı 	\$0.00
	If you somed	are the ben one has died	eficiary of a livin		n someone who has die ct proceeds from a life in	ed surance policy, or are currently entitled to red	eive property because
					you have filed a lawsui surance claims, or rights	it or made a demand for payment s to sue	
	☐ Yes.	Describe e	each claim				
	■ No	_	t and unliquidat	ed claims of	every nature, including	g counterclaims of the debtor and rights t	o set off claims
			sets you did not	already list			
	■ No		ific information	-			
36.			•		•	ny entries for pages you have attached	\$2,500.00

		Case 17-04280	Doc 1	Filed 02/15/17 Document	Entered 0: Page 14 of	2/15/17 08:42:58 63	Desc Main	
Debto	or 1	Donald A. Toutant				Case number (if known)		
Part 5	Des	cribe Any Business-Related	Property You	Own or Have an Interest	ln. List any real esta	ate in Part 1.		
37. D c	you o	wn or have any legal or equi	itable interest	in any business-related p	roperty?			
I	No. Go	to Part 6.						
	Yes. Go	o to line 38.						
Part 6		cribe Any Farm- and Comm			n or Have an Interes	st In.		
	If yo	u own or have an interest in fa	armland, list it ir	n Part 1.				
46. D	o you	own or have any legal or	equitable in	terest in any farm- or o	commercial fishin	g-related property?		
ı	No. C	Go to Part 7.						
	☐ Yes.	Go to line 47.						
Don't 7	7.	Describe All Brown way Very	O	lessesses in Thest Very Di	I Night I fan Albania			
Part 7	/:	Describe All Property You	Own or mave a	an interest in That You Did	Not List Above			
		have other property of a						
	<i>Exampi</i> No	les: Season tickets, country	y club membe	ership				
		Give specific information						
_	165.	sive specific information	•••••					
		Miso	c. hand too	ls				\$400.00
54.	Add th	ne dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here		\$.	400.00
		,						
Part 8	3:	List the Totals of Each Part	of this Form					
55.	Part 1:	: Total real estate, line 2						\$0.00
		: Total vehicles, line 5			\$5,350.00			40.00
57.	Part 3:	: Total personal and hou	sehold items	s, line 15	\$650.00			
58.	Part 4:	: Total financial assets, li	ine 36	_	\$2,500.00			
59.	Part 5:	: Total business-related	property, line	— e 45	\$0.00			
60.	Part 6	: Total farm- and fishing-	related prop	erty, line 52	\$0.00			
61.	Part 7:	: Total other property no	t listed, line	54 +	\$400.00			
62.	Total	oersonal property. Add lir	nes 56 throug	h 61	\$8,900.00	Copy personal property to	otal	\$8,900.00
63.	Total o	of all property on Schedu	ıle A/B. Add	line 55 + line 62			\$8,	900.00

Official Form 106A/B Schedule A/B: Property page 5

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		DUCUITE	III FAUE 13 ULUS	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Donald A. Toutar	nt		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify t	he Property You	ı Claim as	Exempt
--------------------	-----------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Two dressers, bed, one TV	\$300.00	\$300.00	735 ILCS 5/12-1001(b)
Line Holli Schedule AVD. 0.1		☐ 100% of fair market value, up to any applicable statutory limit	
Desktop computer; printer Line from Schedule A/B: 7.1	\$150.00	\$150.00	735 ILCS 5/12-1001(b)
Line from Scredule AVB. 1.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. wearing apparel	\$200.00	\$200.00	735 ILCS 5/12-1001(b)
Ellic Holli Gericadic AVD. 1111		☐ 100% of fair market value, up to any applicable statutory limit	
Anticipated 2016 tax refund Line from Schedule A/B: 28.1	\$2,500.00	\$2,500.00	735 ILCS 5/12-1001(b)
Line non schedule A/D. 20.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. hand tools Line from Schedule A/B: 53.1	\$400.00	\$400.00	735 ILCS 5/12-1001(d)
Elito Hotil Goriodale 77D. 9911		☐ 100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Donald A. Toutant

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Case	e 17-04280	Doc 1	Filed 02/15/17 Document	Entere Page 1	ed 02/15/17 08:42 7 of 63	2:58 Desc M -	1ain
Fill in this informat	ion to identify you	ır case:					
Debtor 1	Donald A. Touta	ant				7	
-	First Name	Mic	ddle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Mic	ddle Name	Last Name			
United States Bankr	uptcy Court for the:	NORTH	HERN DISTRICT OF ILL	INOIS			
Case number						_	if this is an led filing
Official Form 1 Schedule D		Who I	Have Claims :	Secure	d by Property		12/15
					ually responsible for supp n the top of any additional		
. Do any creditors have	ve claims secured by	y your prope	erty?				
☐ No. Check th	is box and submit t	his form to t	the court with your other	schedules. Y	ou have nothing else to r	eport on this form.	
_	of the information		,		J	•	
		DOIOW.					
	ecured Claims				Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular	e secured claim, list the cre- claim, list the other creditors ording to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this claim	Unsecured portion If any
2.1 Carmax Auto	o Finance	Describe tl	he property that secures t	he claim:	\$15,133.00	\$5,350.00	\$9,783.00
Creditor's Name	ahoe Creek	Good co					
Pky		As of the dapply.	date you file, the claim is:	Check all that			
Richmond, \	/A 23238	Conting	jent				
Number, Street, City	y, State & Zip Code	☐ Unliquid					
Who owes the debt?	? Check one.	•	lien. Check all that apply.				
Debtor 1 only		■ An agre	eement you made (such as r	mortgage or se	cured		
Debtor 2 only		car loa	n)	0 0			
Debtor 1 and Debto	or 2 only	☐ Statutor	ry lien (such as tax lien, med	chanic's lien)			
☐ At least one of the o	debtors and another	☐ Judgme	ent lien from a lawsuit				
☐ Check if this claim community debt	relates to a	Other (in	ncluding a right to offset)				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$15,133.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$15,133.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

7740

Date debt was incurred 2015

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	Out	30 17 0-200 1	Docu	ment Page 1	8 of 63	JCJO Mani
Fill	in this inform	ation to identify your				
Deb	tor 1	Donald A. Toutan	t			
		First Name	Middle Name	Last Name		
	tor 2	E: AN	ACT III AT			
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTI	RICT OF ILLINOIS		
Cas	e number					
(if kno					[Check if this is an
						amended filing
√ tt:	icial Form	106E/E				
	icial Form		lha Haya Haa	saurad Claima		40/4E
		F: Creditors W			Part 2 for creditors with NONPRIORITY	12/15
Sche eft. A	dule D: Credito Attach the Cont	rs Who Have Claims Sec	ured by Property. If mo	ore space is needed, copy	any creditors with partially secured cl the Part you need, fill it out, number th do not file that Part. On the top of any	e entries in the boxes on the
Part		of Your PRIORITY Ur				
1.	Do any credito: —	rs have priority unsecure	d claims against you?			
	No. Go to Pa	art 2.				
	Yes.					
Part	2: List All	of Your NONPRIORIT	Y Unsecured Claim	S		
3. 1	Do any credito	rs have nonpriority unsec	cured claims against yo	ou?		
	No. You have	e nothing to report in this p	art. Submit this form to t	he court with your other sch	edules.	
	Yes.					
t	unsecured claim	, list the creditor separately	y for each claim. For eac	h claim listed, identify what	b holds each claim. If a creditor has mor type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	dy included in Part 1. If more
	_					Total claim
4.1	APLM Lt	td.	Last 4	digits of account number	4850	\$69.00
		Creditor's Name	Whon	was the debt incurred?	2000	
		Kinzie St. , IL 60642	when	was the debt incurred?	2009	
	Number Str	reet City State Zlp Code	As of the	ne date you file, the claim	is: Check all that apply	
	Who incur	red the debt? Check one.				
	■ Debtor	1 only	☐ Cor	tingent		
	☐ Debtor 2	2 only	☐ Unli	quidated		
	☐ Debtor	1 and Debtor 2 only	☐ Disp	outed		
	☐ At least	one of the debtors and an	other Type o	f NONPRIORITY unsecure	d claim:	
	☐ Check i	if this claim is for a com	munity	dent loans		
	debt	n subject to offect?		0 1	aration agreement or divorce that you did	not
	No	n subject to offset?	•	as priority claims	ng plans, and other similar debts	
					iy pians, and other similar debts	
	☐ Yes		Oth	er. Specify Medical		

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Case number (if know)

Debto	Donald A. Toutant	Case number (if know)	
4.2	Associate Pathologists of Joliet	Last 4 digits of account number 3134	\$239.00
	Nonpriority Creditor's Name 39784 Treasury Ctr. Chicago, IL 60694-9700	When was the debt incurred? 2009	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.3	Atg Credit	Last 4 digits of account number 0270	\$385.00
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2 Chicago, IL 60622	When was the debt incurred? Opened 04/15	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Physicians	
4.4	Aurora Emergency Associates	Last 4 digits of account number 0101	\$835.00
	Nonpriority Creditor's Name P.O. Box 5990	When was the debt incurred? 2009	
	Carol Stream, IL 60197	As of the date was file the claim in Obesis all that such	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	□ res	Other. Specify Medical	

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Case number (if know)

Debto	Donald A. Toutant	Case number (if know)	
4.5	Aurora Radiology Consultants Nonpriority Creditor's Name	Last 4 digits of account number 6064	\$47.00
	520 E. 22nd St.	When was the debt incurred? 2009	
	Lombard, IL 60148 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the dam is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
	Bristol Bay Master Operating		
4.6	Assoc.	Last 4 digits of account number	\$2,755.00
	Nonpriority Creditor's Name 2205 Point Blvd. Ste 200	When was the debt incurred? 2011	
	Elgin, IL 60123 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Chock and age,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Judgment	
4.7	Bristol Bay Townhome Assoc. Nonpriority Creditor's Name	Last 4 digits of account number	\$7,964.00
	1901 Roselle Rd. Ste 1000 Schaumburg, IL 60195	When was the debt incurred? 2011	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	<u> </u>	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Judgment	

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Debtor 1 Donald A. Toutant Case number (if know) 4.8 Capital One Last 4 digits of account number 1141 \$268.00 Nonpriority Creditor's Name Opened 04/15 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 7/30/16 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 **Capital One** Last 4 digits of account number 0041 \$0.00 Nonpriority Creditor's Name Opened 4/06/09 Last Active Po Box 30253 When was the debt incurred? 4/06/09 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Capital One Bank Usa N 6088 \$2,714.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 04/14 Last Active 15000 Capital One Dr When was the debt incurred? 7/21/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Donald A. Foutant		Case number (if know)	
Cardmember Service	Last 4 digits of account number	9989	\$937.78
P.O. Box 15153	When was the debt incurred?	2010	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	I-Chase	
Credit First N A	Last 4 digits of account number	2047	\$1,019.00
Nonpriority Creditor's Name		Opened 06/16 Least Active	
6275 Eastland Rd Brookpark, OH 44142	When was the debt incurred?	7/23/16	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	,	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Credit First NA	Last 4 digits of account number	2047	\$163.00
Nonpriority Creditor's Name PO Box 81344	When was the debt incurred?	2016	
	As of the date you file, the claim i	s: Chock all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	S. Offect all that apply	
■ Debtor 1 only	☐ Contingent		
	<u> </u>		
☐ At least one of the debtors and another		d claim:	
	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐Yes	Other, Specify Credit - Fire	estone	
	Nonpriority Creditor's Name P.O. Box 15153 Wilmington, DE 19886-5153 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Credit First N A Nonpriority Creditor's Name 6275 Eastland Rd Brookpark, OH 44142 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Credit First NA Nonpriority Creditor's Name PO Box 81344 Cleveland, OH 44188-0344 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Anonpriority Creditor's Name PO Box 81344 Cleveland, OH 44188-0344 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Cardmember Service Nonpriority Creditor's Name P.O. Box 15153 Wilmington, DE 19886-5153 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Last 4 digits of account number Credit First N A Nonpriority Creditor's Name 6275 Eastland Rd Brookpark, OH 44142 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community Debtor 1 and Debtor 2 only Credit First N A Nonpriority Creditor's Name 6275 Eastland Rd Brookpark, OH 44142 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Credit First NA Nonpriority Creditor's Name O Debtor 2 only Credit First NA Nonpriority Creditor's Name O Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Credit First NA Nonpriority Creditor's Name O Box 81344 Cleveland, OH 44188-0344 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 4 and Debtor 5 and another Debtor 4 and Debtor 5 and another Debtor 5 and 5 a	Cardmember Service Noopriority Creditor's Name P.O. Box 15153 Number Street City State 2/D Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 street Street City State 2/D Code Noopriority Creditor's Name Credit First N A Noopriority Creditor's Name Cardingent Debtor 2 only Uniquidated Debtor 2 only Uniquidated Debtor 3 only Uniquidated Debtor 4 only Uniquidated Debtor 5 only Uniquidated Debtor 6 only Uniquidated Debtor 1 only Uniquidated Debtor 2 only Uniquidated Debtor 3 only Uniquidated Debtor 4 only Uniquidated Debtor 5 only Uniquidated Debtor 6 only Uniquidated Debtor 1 only Uniquidated Debtor 1 only Uniquidated Debtor 2 only Uniquidated Debtor 3 only Uniquidated Debtor 4 only Uniquidated Debtor 5 only Uniquidated Debtor 6 only Uniquidated Debtor 1 only Uniquidated Debtor 2 only Uniquidated Debtor 1 only Uniquidated Debtor 1 only Uniquidated Debtor 1 only Uniquidated Debtor 2 only Uniquidated Debtor 3 only Uniquidated Debtor 4 only Uniquidated Debtor 5 only Uniquidated Debtor 6 only Uniquidated Debtor 1 only Uniquidated Debtor 1 only Uniquidated Debtor 1 only Uniquidate

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Debtor 1 Donald A. Toutant Case number (if know) 4.1 Earthmovers Cu 8031 \$1,002.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 04/15 Last Active 2195 Baseline Rd When was the debt incurred? 10/07/16 Oswego, IL 60543 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes **Educational & Psychological** 4.1 \$425.00 O000 5 Last 4 digits of account number Service Nonpriority Creditor's Name When was the debt incurred? 2009 847 N. Center St. Naperville, IL 60563 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify Medical 4.1 9294 **Emergency Treatment, S.C.** Last 4 digits of account number \$300.00 Nonpriority Creditor's Name 900 Jorie Blvd. - Ste 200 When was the debt incurred? 2009 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Medical ☐ Yes

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Debt	or 1 Donald A. Toutant		Case number (if know)	
4.1 7	Emergency Treatment, S.C.	Last 4 digits of account number	2579	\$315.00
	Nonpriority Creditor's Name 900 Jorie Blvd Ste 200 Oak Brook, IL 60523	When was the debt incurred?	2009	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 3	G M A C	Last 4 digits of account number	5626	\$11,887.00
	Nonpriority Creditor's Name		0	
	15303 S 94th Ave Orland Park, IL 60462	When was the debt incurred?	Opened 09/07 Last Active 1/08/10	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.1 9	G M A C	Last 4 digits of account number	4295	\$0.00
	Nonpriority Creditor's Name	_	Omercal OC/07 Least Active	
	15303 S 94th Ave Orland Park, IL 60462	When was the debt incurred?	Opened 06/07 Last Active 9/10/07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other Specify Lease		

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Debtor 1 Donald A. Toutant Case number (if know) 4.2 J.b. Robinson Jewelers 9759 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 11/07 Last Active 375 Ghent Rd When was the debt incurred? 1/24/12 Fairlawn, OH 44333 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Mabt/contfin 1881 \$468.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/16 Last Active 121 Continental Dr Ste 1 When was the debt incurred? 10/18/16 Newark, DE 19713 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 42 Medical Recovery Speci 7504 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 2250 E Devon When was the debt incurred? **Opened 03/14** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Rush Copley Memorial** Other. Specify Hospital ☐ Yes

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Debtor 1 Donald A. Toutant Case number (if know) 4.2 Oswego Fire Protection 6418 \$640.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O Box 457 When was the debt incurred? 2009 Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 **Plainfield Fire Protection** 8413 \$590.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 457 When was the debt incurred? 2009 Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical 4.2 **Provena Mercy Mdical Center** 5810 \$3.028.54 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 88001 When was the debt incurred? 2009 Chicago, IL 60680-1001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

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Donald A. Toutant		
Provena Mercy Mdical Center	Last 4 digits of account number 5807	\$3,888.
Nonpriority Creditor's Name P.O. Box 88001	When was the debt incurred? 2009	
Chicago, IL 60680-1001 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical	
Resident Colletct	Last 4 digits of account number 9046	\$1,460.
Nonpriority Creditor's Name 4230 LBJ Freeway Ste. 407 Dallas, TX 75244	When was the debt incurred? 2015	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection-Woodlands Of Crest Hill	
Rlaz A. Baber M.D.	Last 4 digits of account number 3759	\$350.
Nonpriority Creditor's Name 1460 Bond St. Ste.130	When was the debt incurred? 2009	·
Naperville, IL 60563		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Пол	
Debtor 1 only Debtor 2 only	☐ Contingent	
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Medical	

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Donald A. Foutant	Case number (if know)	
Ridge Ambulanc Service	Last 4 digits of account number 1550	\$737.00
Nonpriority Creditor's Name 2252 Cornell Ave.	When was the debt incurred? 2009	
Montgomery, IL 60538 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	П	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Medical	
Ridge Ambulance Service	Last 4 digits of account number 3864	\$292.18
Nonpriority Creditor's Name	Last 4 digits of account number 3864	Ψ232.10
1851 Aucutt Rd	When was the debt incurred? 2009	
Montgomery, IL 60538	- Acceptate the confidence of the december of	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	П 0	
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Rush-Copley Medical Center	Last 4 digits of account number 0775	\$1,127.00
Nonpriority Creditor's Name	Last 4 digits of account number 0775	φ1,127.00
P.O. Box 352	When was the debt incurred? 2009	
Aurora, IL 60507	- Acceptate the configuration of the state o	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	 Student loans Obligations arising out of a separation agreement or divorce that you did report as priority claims 	not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

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Debtor	Donald A. Toutant		Case number (if know)	
4.3	Rush-Copley Medical Center	Lock 4 distinct of account number	3363	\$1,943.00
2	Nonpriority Creditor's Name	Last 4 digits of account number		\$1,943.00
	P.O. Box 352	When was the debt incurred?	2009	
	Aurora, IL 60507			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	a plane, and other similar debts	
		·	ig plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3				*
3	Rush-Copley Medical Center	Last 4 digits of account number	6394	\$960.00
	Nonpriority Creditor's Name P.O. Box 352	When was the debt incurred?	2009	
	Aurora, IL 60507	When was the dest mounted.	2003	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Medical		
4.3				
4.5	Sprint	Last 4 digits of account number	9289	\$421.49
	Nonpriority Creditor's Name	W/	2040	
	P.O. Box 4191 Carol Stream, IL 60197-4191	When was the debt incurred?	2010	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify		
		- Othor. Opoony		

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Case number (if know)

Debt	or 1 Donald A. Toutant	——————	Case number (if know)	
4.3	The Woodlands of Crest Hill		None	Unknown
5	Nonpriority Creditor's Name	Last 4 digits of account number	Notice	Unknown
	1615 Arbor Lane Crest Hill. IL 60403	When was the debt incurred?	2008	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other. Specify Aparement	•	
4.3				
4.3 6	U.S. Bank	Last 4 digits of account number	9310	\$684.15
	Nonpriority Creditor's Name P.O Box 790408	When was the debt incurred?	2009	
	Saint Louis, MO 63179-0084	when was the debt incurred?	2009	
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.3				
7	Us Bank	Last 4 digits of account number	0378	Unknown
	Nonpriority Creditor's Name 4325 17th Ave S	When was the debt incurred?	Opened 2/01/07 Last Active 7/29/11	
	Fargo, ND 58125			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<u></u>	-		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Credit Card	İ	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 17-04280 Doc 1 Filed 02/15/17 Entered 02/15/17 08:42:58 Desc Main Document Page 31 of 63 Case number (if know) Debtor 1 Donald A. Toutant Allied Collection Service, Inc. Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4230 LBJ Freeway - Ste 407 ■ Part 2: Creditors with Nonpriority Unsecured Claims Dallas, TX 75244-5809 Last 4 digits of account number 9046 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bristol Bay Town Home Assoc.** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 50 E.Commerce Dr. ■ Part 2: Creditors with Nonpriority Unsecured Claims Schaumburg, IL 60173 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Cavalry Portfolio Services** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 27288 ■ Part 2: Creditors with Nonpriority Unsecured Claims Tempe, AZ 85285-7288 Last 4 digits of account number 5915 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Charles M. Keough, Esq. Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 114 E. Van Buren ■ Part 2: Creditors with Nonpriority Unsecured Claims Naperville, IL 60540 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Charles M. Keough, Esq. Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 114 E. Van Buren Part 2: Creditors with Nonpriority Unsecured Claims Naperville, IL 60540 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit First NA Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6275 Eastland Rd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Brook Park, OH 44142 Last 4 digits of account number 2047 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Creditors Collection Bureau** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 63 Part 2: Creditors with Nonpriority Unsecured Claims Kankakee, IL 60901 Last 4 digits of account number 8959 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Creditors Collection Bureau** Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 755 Almar Pwy ■ Part 2: Creditors with Nonpriority Unsecured Claims Bourbonnais, IL 60914 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Creditors Collection Bureau** Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 755 Almar Pwy ■ Part 2: Creditors with Nonpriority Unsecured Claims Bourbonnais, IL 60914 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Dependon Collection Services** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 4833 Part 2: Creditors with Nonpriority Unsecured Claims Hinsdale, IL 60522 Last 4 digits of account number 8728 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Dynamic Recovery Solutions** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 25759 ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenville, SC 29616-0759 Last 4 digits of account number 0356

Firstsource Financial Solutions

Name and Address

Official Form 106 E/F

Line 4.31 of (Check one):

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Entered 02/15/17 08:42:58 Case 17-04280 Doc 1 Filed 02/15/17 Desc Main Page 32 of 63 Document Case number (if know) Debtor 1 Donald A. Toutant Phoenix, AZ 85067-3009 Last 4 digits of account number 4504 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Firstsource Financial Solutions** Line 4.32 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O Box 33009 ■ Part 2: Creditors with Nonpriority Unsecured Claims Phoenix, AZ 85067-3009 Last 4 digits of account number 8250 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Kendall County Circuit Court Clerk** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 807 W. Joun st. Part 2: Creditors with Nonpriority Unsecured Claims Yorkville, IL 60560 Last 4 digits of account number M351 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Kendall County Circuit Court Clerk** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 807 W. Joun st. Part 2: Creditors with Nonpriority Unsecured Claims Yorkville, IL 60560 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MCS Collections, Inc. Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 725 S. Wells St. - Ste 501 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60607 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MCS Collections, Inc. Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 725 S. Wells St. - Ste 501 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60607 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Medical Recovery Specialists, Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2250 E. Devon Ave. ■ Part 2: Creditors with Nonpriority Unsecured Claims Des Plaines, IL 60018 Last 4 digits of account number 3606 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mintex Inc. Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 800 West Fifth Ave. ■ Part 2: Creditors with Nonpriority Unsecured Claims Suite 100A Naperville, IL 60563-4966 Last 4 digits of account number 1550 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? North Shore Agency Line 4.34 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 270 Spagnoli Rd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Melville, NY 11747 Last 4 digits of account number 9289 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Buffalo, NY 14225-1943 Last 4 digits of account number 7784

Northstar Location Services 4285 Genesee St.

Payment Processing Centers

Louisville, KY 40290-1952

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5626

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.34 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

P.O. Box 1548 ■ Part 2: Creditors with Nonpriority Unsecured Claims Lynnwood, WA 98036-1548

Name and Address

RPM Inc.

Name and Address

P.O. Box 9001952

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Deptor 1 Donald A. Loutant	_	Case number (if know)
	Last 4 digits of account number	9289
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
The WEoodlands of Crest Hill	Line 4.27 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1615 ARbor Lane Crest Hill, IL 60403		Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
United Recovery System	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 722929 Houston, TX 77272-2929		Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	0400

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	48,315.17
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	48,315.17

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			III FAUE 34 01 03	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Donald A. Toutar	nt		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3			Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
2.7	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,				

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		Docume	nt Page 35 o	of 63	
Fill in this	information to identify your	case:			
Debtor 1	Donald A. Touta	nt			
	First Name	Middle Name	Last Name		
	Firet Name	Middle Name	Last Name		
(Spouse II, IIIII	ig) i iist ivanie	Wildule Name	Lastivaine		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numl	ber				
(if known)				☐ Check if this is an	
				amended filing	
Officia	I Form 106H				
		labtana			
schea	ule H: Your Cod	leptors		12/15	
eople are ill it out, a our name	filing together, both are equ nd number the entries in the and case number (if known	ually responsible for supp boxes on the left. Attach). Answer every question.	lying correct informati the Additional Page to	ion. If more space is needed, copy the Additional Pagoo this page. On the top of any Additional Pages, write	∍,
`	,	,			
■ No					
Debtor 2 Spouse F, filing) First Name Middle Name Last Name					
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only 106D), Schedule E/F (Officia	if that person is a guarant	or or cosigner. Make s	sure you have listed the creditor on Schedule D (Offic	ial
		ZIP Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:	Ċ
3.1				□ Schedule D. line	
	Name				
_	Number Street			_	
		State	ZIP Code		
3.2				☐ Schedule D. line	_
	Name			<u> </u>	
-	Number Street			_	

State

City

ZIP Code

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E.II						ı				
	in this information to identify your captor 1 Donald A. To									
	otor 2				_					
	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number					☐ An				tition chapter date:
	fficial Form 106l					MN	/ / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment	r spouse is not filing wi	th you, do not includ	de infori	mati	on about y	our spo	use. If moi	re spac	e is needed,
1.	Fill in your employment information.		Debtor 1			1	Debtor 2	or non-fili	ng spo	use
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Emplo	•		
	information about additional	p.c.ycc.	☐ Not employed				☐ Not employed			
	employers.	Occupation	Maintenence							
	Include part-time, seasonal, or self-employed work.	Employer's name	Lachnit Bakery	Service	s					
	Occupation may include student or homemaker, if it applies.	Employer's address	55 W. Home Ave Villa Park, IL 60							
		How long employed the	here? 6 years							
Par	Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for	any	line, write S	\$0 in the	space. Incl	ude you	ır non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for th	at perso	n on the line	es belov	w. If you need
						For Debt	or 1	For Debi		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,7	90.00	\$		N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A

Calculate gross Income. Add line 2 + line 3.

2,790.00

N/A

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Deb	tor 1	Donald A. Toutant	-	(Case	number (if kr	nown)				
					For	Debtor 1			Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.		\$	2,790	0.00	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	783	3.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k	o.	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	C.	\$	(0.00	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$		N/A	_
	5e.	Insurance	56		\$_		0.00	\$		N/A	
	5f. 5g.	Domestic support obligations Union dues	5f 5g		\$ \$		0.00 0.00	\$ \$		N/A N/A	_
	5g. 5h.	Other deductions. Specify:		y. h.+	\$ _		0.00	+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		* \$		3.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$	2,007		\$		N/A	=
8.		all other income regularly received:			Ψ-	2,007	.00	Ψ		14/7	<u>-</u>
0.	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$	(0.00	\$		N/A	
	8b.	Interest and dividends	8k	b.	\$		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			Φ.			ф.		NI/A	_
	8d.	settlement, and property settlement. Unemployment compensation	80 80		\$_ \$).00).00	\$ \$		N/A N/A	_
	8e.	Social Security	86		\$ -		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f	f.	\$	(0.00	\$		N/A	-
	8g.	Pension or retirement income	_ 80	g.	\$		0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8ł	h.+	\$	C	0.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	(0.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,007.00	+ \$		N/A	= \$	2,007.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				2,007.00	. *		14/4	_	2,007.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep		,			,	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	2,007.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						l	Combi month	ned ly income
	=	No.									

Official Form 106I Schedule I: Your Income page 2

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Fill	I in this information to identify your case:				
Deb	bbtor 1 Donald A. Toutant	C	heck if this is:		
	ebtor 2 pouse, if filing)			d filing ent showing postpetition chapte s as of the following date:	r
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINO	IS	MM / DD / Y		
	sse number				
	known)				
0	Official Form 106J				
S	chedule J: Your Expenses			12	/15
info	e as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this founder (if known). Answer every question.				
Par 1.	Is this a joint case?				
	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses fi</i>	or Separate Household of E	Debtor 2.		
2.	Do you have dependents? ■ No	·			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Depende age	ent's Does dependent live with you?	
	Do not state the			□ No	
	dependents names.			Pes	
				□ No □ Yes	
				□ No	
				Yes	
				□ No	
3.	Do your expenses include ■ No.			Pes	
٥.	expenses of people other than				
	yourself and your dependents?				
	art 2: Estimate Your Ongoing Monthly Expenses				
exp	stimate your expenses as of your bankruptcy filing date unless yo penses as of a date after the bankruptcy is filed. If this is a supple plicable date.	u are using this form as a emental <i>Schedule J</i> , chec	supplement in k the box at th	n a Chapter 13 case to report e top of the form and fill in th	е
the	clude expenses paid for with non-cash government assistance if ye value of such assistance and have included it on Schedule I: You ficial Form 1061.)		Yo	ur expenses	
(0)	miciai Form 100i.)			оп опропосс	
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage 4	. \$	450.00	
	If not included in line 4:				
	4a. Real estate taxes	4a	ı. \$	0.00	
	4b. Property, homeowner's, or renter's insurance		. \$	0.00	
	4c. Home maintenance, repair, and upkeep expenses		:. \$	0.00	
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hom		l. \$ 5. \$	0.00	

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Debtor 1	Donald A	A. Toutant	Case num	nber (if known)	
S. Util i	ties:				
6a.		heat, natural gas	6a.	\$	0.00
6b.		ver, garbage collection	6b.	· ·	0.00
6c.		, cell phone, Internet, satellite, and cable services	6c.		105.00
6d.	Other. Spe		6d.	· -	0.00
		ekeeping supplies	7.	· -	300.00
		hildren's education costs	8.	·	0.00
_		ry, and dry cleaning	9.	·	100.00
	•	•	10.	·	
	•	roducts and services ntal expenses		· ·	0.00
		•	11.	\$	0.00
	nsportation. not include ca	Include gas, maintenance, bus or train fare.	12.	\$	300.00
		clubs, recreation, newspapers, magazines, and books	13.	· <u> </u>	100.00
		ributions and religious donations	14.	·	0.00
		ibutions and religious donations	14.	Φ	0.00
	irance.	surance deducted from your pay or included in lines 4 or 20.			
	Life insura	, , ,	15a.	\$	60.00
	. Health insu		15a. 15b.	· -	319.00
	Vehicle ins		15b. 15c.	· -	
				·	100.00
		rance. Specify:	15d.	\$	0.00
		clude taxes deducted from your pay or included in lines 4 or 20		¢	0.00
	cify:		16.	\$	0.00
		ease payments: ents for Vehicle 1	170	¢	245.00
	, ,		17a.		345.00
		ents for Vehicle 2	17b.	*	0.00
	Other. Spe		17c.	·	0.00
	Other. Spe	•	17d.	\$	0.00
		of alimony, maintenance, and support that you did not rep		\$	0.00
		your pay on line 5, Schedule I, Your Income (Official Form	1061).		
		you make to support others who do not live with you.	40	\$	0.00
	cify:	and a second control of the body of the Body of the Common of the second control of the	19.		
		erty expenses not included in lines 4 or 5 of this form or or			0.00
		on other property	20a.	· ·	0.00
	Real estate		20b.	·	0.00
		nomeowner's, or renter's insurance	20c.	·	0.00
20d	. Maintenan	ce, repair, and upkeep expenses	20d.		0.00
20e	. Homeown	er's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:	Gym membership	21.	+\$	25.00
0-1					
	-	nonthly expenses		•	
	Add lines 4	•	2010	\$	2,204.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 10	J6J-2	\$	
22c	Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,204.00
Cale	sulate veus s	nonthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	¢	2 007 00
				· ·	2,007.00
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,204.00
230	Subtract v	our monthly expenses from your monthly income.			
230		is your <i>monthly net incom</i> e.	23c.	\$	-197.00
		- ,		μ	
4. Do '	you expect a	in increase or decrease in your expenses within the year a	fter you file this	s form?	
For	example, do yo	u expect to finish paying for your car loan within the year or do you exp			e or decrease because o
		terms of your mortgage?	5 5		
	۱o.				
		Explain here:			
	· · ·	, p			

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Fill in th	his inform	ation to identify your	case:					
Debtor 1 Donald A. Toutant]		
		First Name	Middle Name	La	st Name			
Debtor 2								
(Spouse if,	, filing)	First Name	Middle Name	La	st Name			
United S	States Ban	kruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINC	IS			
Case nu	ımber							
(if known)								Check if this is an
				,				amended filing
Officia	al Form	106Dec						
Dec	larati	on About a	ın Individua	I Debt	or's Sch	edules		12/15
If two ma	arried ped	ople are filing together	r, both are equally respons	onsible for s	supplying correc	t information.		
Vali mile	et fila this	form whenever you fi	le bankruptcy schedule	s or amond	ad schadulas M	lakina a falso sta	tement co	ncealing property or
			n connection with a bar					
years, o	r both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.					
	C:	Dalam						
	Sign	Below						
Die	d vou nav	or agree to hav some	one who is NOT an atto	rnev to heli	you fill out ban	kruptcy forms?		
Dic	u you pay	or agree to pay some	one who is NOT all allo	iney to nei	you iii out baii	ikiupicy ioiiiis:		
	No							
П	Voc. N	ame of person				Attach Pa	nkruntov Po	tition Preparer's Notice,
Ц	165. IN							ature (Official Form 119)
								,
			4b = 4 1 b = = = = 1 4b = =		l d. d			
		true and correct.	that I have read the sur	nmary and s	scneaules filea v	vith this declara	ion and	
	-							
X		ald A. Toutant		X	Signature of De	htor O		
		A. Toutant e of Debtor 1			Signature of De	טוטו ∠		
	Signature	O Debitor 1						
	Date F	ebruary 15, 2017			Date			
								

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Fill	n this inform	nation to identify you	r case:			
Deb	tor 1	Donald A. Touta	nt			
		First Name	Middle Name	Last Name		
Deb (Spou	tor 2 ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Cas	e number					
(if kno					_	heck if this is an mended filing
∩ff	ioial Ear	m 107				
	icial For		Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
infor	mation. If me	ore space is needed,	attach a separate sheet to		additional pages, write you	
numl	ber (if known	ı). Answer every ques	stion.			
Part	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married					
	■ Not mari	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	.		•	•		
	■ No □ Yes List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
		or Address:	·	·		Datas Dahtar 2
	Deptor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	aress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
_				exclusions)	_	and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,939.00	☐ Wages, commissions, bonuses, tips	
☐ Operating a business ☐ Opera					☐ Operating a business	

Official Form 107

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				Debtor 1		Debtor 2		
		Sources of income Check all that apply.			apply.	Gross income (before deductions and exclusions)		
	l lanuary 1 to December 31 2016 i			■ Wages, commissions, bonuses, tips	-			
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$33,333.00	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint ca the gross inc	her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa	rest; dividends; money collect you received together, list it of	cted from lawsuits; only once under D	royalties; ar ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ıvments You	ı Made Before You Filed for	Bankruptcv			
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor l	2's debts primarily consume Debtor 2 has primarily consuments personal, family, or househo	r debts? umer debts. Consumer debt	ts are defined in 11	I U.S.C. § 10	01(8) as "incurred by an
			90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	al of \$6,425* or mo	ore?	
		□ No.	Go to line	7.				
		☐ Yes	paid that connot include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support obliques to the standard of the stand	gations, such as cl	hild support a	and alimony. Also, do
		* Subject	to adjustmer	nt on 4/01/19 and every 3 year	s after that for cases filed on	or after the date of	of adjustmen	t.
	Yes.			or both have primarily consuore you filed for bankruptcy, di		al of \$600 or more	?	
		□ No.	Go to line	7.				
		■ Yes	include pay	each creditor to whom you pai yments for domestic support o r this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for
	12800 T	Auto Fina uckahoe (ond, VA 23	Creek Pky	November & December 20' January 2017 Auromobile payments	\$1,035.00 16,	\$15,133.00		

☐ Other__

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Case number (if known) Document Debtor 1 **Donald A. Toutant**

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No							
	Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an		
	No☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment		
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	para	Jilli Owe	moldae orec	and a name		
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No	tcy, were you a party in an						
	Yes. Fill in the details. Case title Case number	Nature of the case	Court or agency		Status of the	ne case		
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.		erty repossessed, 1	foreclosed, garnis	hed, attache	d, seized, or levied?		
	Creditor Name and Address	Describe the Property Explain what happened	•	Date		Value of the property		
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed ■ No □ Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institution	, set off any	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount		
12.	taken 2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes							
Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value		
	Person to Whom You Gave the Gift and Address:							

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14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No								
	Yes. Fill in the details for each gift or of Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	on. Describe what you contributed		Dates you contributed	Value			
Pai	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?								
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Date of your loss	Value of property los						
Pai	rt 7: List Certain Payments or Transfer	s							
 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No 									
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	′ ou	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount o paymen			
	Law Office Of Joseph R. Ramos 340 N. Lake Street Aurora, IL 60506 joseph@jramoslaw.com		Attorney Fees - 1015.00 Filing Fee - \$335.00 Credit Counseling & debtor Ed (Reimbursement) - \$80.00	lucation	February 3, 2017	\$1,015.00			
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	r to make payments to your creditors		r transfer any prope	erty to anyone who			
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount o paymen			
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	u r busin s made a	ess or financial affairs? as security (such as the granting of a se						
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts	Date transfer was made			

paid in exchange

Person's relationship to you

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Debtor 1 **Donald A. Toutant**

19.		thin 10 years before you filed for bankrup neficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a	a self-settle	d trust or similar device	of which you are a	
	Na	ame of trust	Description and v	Description and value of the property transferred				
Par	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposit	t Boxes, and S	torage Unit	s		
20.	sol Inc	thin 1 year before you filed for bankrupto d, moved, or transferred? lude checking, savings, money market, o uses, pension funds, cooperatives, assoc	or other financial accou	nts; certificate	s of deposi			
	_	No Yes. Fill in the details.						
	Na	ame of Financial Institution and ddress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
		No						
		Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)	Address (Number, Street, City,		the contents	Do you still have it?	
22.	Ha	ve you stored property in a storage unit o No Yes. Fill in the details.	or place other than your	home within 1	l year befor	re you filed for bankrupt	tcy?	
	_	ame of Storage Facility	Who else has or h	nad access	Describe	the contents	Do you still	
		diress (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)			have it?		
Par	t 9:	Identify Property You Hold or Control	for Someone Else					
23.		you hold or control any property that so someone.	meone else owns? Incli	ude any prope	rty you borr	rowed from, are storing	for, or hold in trust	
		No Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)			lumber, Street, City, State and ZIP		the property	Value	
	t 10 the	Give Details About Environmental Info						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or							

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Donald A. Toutant

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity, ei	ther full-time or part-time				
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execut	tive of a corporation					
	☐ An owner of at least 5% of the voting or	equity securities of a corporation					
	■ No. None of the above applies. Go to Part	12.					
	☐ Yes. Check all that apply above and fill in t	he details below for each business.					
		escribe the nature of the business	Employer Identification number Do not include Social Security r				
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	ŕ	iumber or itin.			
28.	Within 2 years before you filed for bankruptcy, or institutions, creditors, or other parties.	did you give a financial statement to	Dates business existed anyone about your business? Inclu	de all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued					

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Case number (if known) Debtor 1 Donald A. Toutant Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donald A. Toutant Signature of Debtor 2 Donald A. Toutant Signature of Debtor 1 Date Date February 15, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	2221		
	mation to identify your			
Debtor 1	Donald A. Toutar	Middle Name	Last Name	
Debtor 2	. not riame	imadic riame	2001.10.110	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
00000	400			
Official Fo		n for Indiv	iduala Eilina Undar Ch	ontor 7
Statemer	it of intentio	n for indiv	iduals Filing Under Ch	12/15
If you are an indi	vidual filing under cha	nter 7 vou must fill	out this form if:	
	e claims secured by yo		out this form ii.	
_	ed personal property a		ot expired.	
You must file this	s form with the court we ever is earlier, unless th	ithin 30 days after	you file your bankruptcy petition or by the e time for cause. You must also send copi	
	eople are filing togethe	r in a joint case, bo	th are equally responsible for supplying c	orrect information. Both debtors must
	and accurate as possib our name and case nui		needed, attach a separate sheet to this fo	orm. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
 For any credite information be 	-	art 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the prop secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's C	armax Auto Finance	;	☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	_ 140
Description of	2012 Nissan Sentr	a 65000 miles	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	Good condition		☐ Retain the property and [explain]:	
	our Unexpired Persona		in Schedule G: Executory Contracts and I	Jnexpired Leases (Official Form 106G), fill
in the information	n below. Do not list rea	al estate leases. Un	expired leases are leases that are still in e he trustee does not assume it. 11 U.S.C. §	ffect; the lease period has not yet ended.
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
				_
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor	Donald A. Toutant	Case number (if known)
	ntion of leased	
Property	y:	☐ Yes
Lessor's	s name: tion of leased	□ No
Property		☐ Yes
Lessor's	s name: tion of leased	□ No
Property		☐ Yes
Lessor's	s name: tion of leased	□ No
Property		☐ Yes
Lessor's	- 11-11-11-1	□ No
Property	tion of leased y:	☐ Yes
Part 3:	Sign Below	
	penalty of perjury, I declare that I have indicated my intention about the subject to an unexpired lease.	out any property of my estate that secures a debt and any personal
χ /s/	/ Donald A. Toutant	X
	onald A. Toutant gnature of Debtor 1	Signature of Debtor 2
Da	February 15, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-04280 Doc 1 Filed 02/15/17 Entered 02/15/17 08:42:58 Desc Main Document Page 54 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Donald A. To	outant					Case No.		
					Debtor(s)		Chapter	7	
	DI	SCLOS	SURE OF COM	PENSATIO	ON OF ATT	ORNEY	FOR DI	EBTOR(S)	
1.	compensation paid	to me wit	(a) and Fed. Bankr. P. 2 thin one year before the debtor(s) in contemplat	e filing of the pe	tition in bankrup	otcy, or agree	d to be paid	to me, for servi	
	For legal servi	ces, I hav	re agreed to accept			\$		1,015.00	-
			s statement I have recei					1,015.00	-
	Balance Due					\$		0.00	-
2.	The source of the c	ompensati	ion paid to me was:						
	Debtor		Other (specify):						
3.	The source of comp	ensation	to be paid to me is:						
	Debtor		Other (specify):						
4.	■ I have not agree	ed to share	re the above-disclosed of	compensation w	ith any other per	rson unless th	ney are mem	bers and associa	ates of my law firm.
			e above-disclosed compogether with a list of th						f my law firm. A
5.	In return for the ab	ove-disclo	osed fee, I have agreed	to render legal	service for all as	spects of the	oankruptcy c	ease, including:	
	 b. Preparation and c. Representation d. [Other provision Negotiat reaffirma 	filing of a of the deb ns as need ions with ation agr	inancial situation, and rany petition, schedules, otor at the meeting of creded] h secured creditors reements and applications or the secured creditors or the secured cred	statement of a reditors and con to reduce to cations as need	ffairs and plan w firmation hearing market value; eded; preparat	which may be g, and any ac	required; ljourned hea n planning;	rings thereof;	and filing of
6.	By agreement with Represe	the debto	or(s), the above-disclose of the debtors in any sary proceeding.	ed fee does not i	include the follow	wing service judicial lier	avoidanc	es, relief fron	n stay actions or
				CERTI	FICATION				
this	I certify that the for bankruptcy proceed		a complete statement of	of any agreemer	nt or arrangemen	t for paymen	t to me for r	epresentation of	f the debtor(s) in
ı	February 15, 2017	7			/s/ Joseph R.	Ramos			
-	Date				Joseph R. Rai	mos 62081	95 - Illinois	3	
					Signature of Atte Law Office Of		Ramos		
					340 N. Lake S	treet			
					Aurora, IL 605 (630) 896-726		0) 896-726	3	
					joseph@jrame	oslaw.com			
				-	Name of law firr	m	<u> </u>		

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ATTORNEY'S FEE CONTRACT Chapter 7 Bankruptcy

THIS AGREEME	NT is made this 1774 day of NOVEY 841-2016, by and between
DONALD	A. TOUTANT
A C 1	

hereinafter referred to as the CLIENT, and Joseph R. Ramos, hereinafter referred to as the ATTORNEY.

- 1. The CLIENT has retained and does hereby retain and employ the ATTORNEY to act for and on behalf of CLIENT in connection with the representation of CLIENT in a Chapter 7 Bankruptcy petition to be filed on CLIENT's behalf.
- 2. In consideration of the services rendered and to be rendered by the ATTORNEY, the CLIENT agrees to pay to the ATTORNEY a reasonable ATTORNEY's fee and expenses calculated as follows:

(a) ATTORNEY's fee: \$1015.00

(b) Filing Fee: \$ 335.00

(c) Required Counseling Sessions: \$80.00

Total Fees and Costs: \$1430.00

- 3. CLIENT understands that his/her case shall not be filed and CLIENT shall not be protected by the Bankruptcy Code's automatic stay provisions until CLIENT has paid to ATTORNEY the entire sum of fees and costs mentioned above.
- 4. CLIENT agrees to pay a security retainer in the amount of \$\(\frac{1050.00}{\text{to apply}}\) to apply to ATTORNEY's fees, costs and expenses in connection with the above matter.
- 5. The fee is for payment and preparation of a Chapter 7 Bankruptcy Petition, including all of the required schedules and forms and representation at the CLIENT's Meeting of Creditors ("341 Meeting"), maintenance of the file and negotiation of reaffirmation agreements.

6. Fees Not Covered By This Agreement:

(a) Costs and Fees For Amending Schedules - CLIENT understands that it is the CLIENT's responsibility to include all debts on the schedules. The CLIENT further understands that any debts not included in said schedules may not be discharged in CLIENT bankruptcy. If CLIENT fails to provide ATTORNEY with all the information necessary to prepare the petition and schedules which later necessitates amendment to the schedules, CLIENT agrees to pay an additional fee of \$50.00 to cover fees and costs of any

amendment due to an error or omission on CLIENT's part. A separate fee will be charged for each additional amendment.

- (b) Adversary Proceedings In the event an Adversary Proceeding is filed against CLIENT, a retainer fee of \$1500.00 shall be required in order for ATTORNEY to represent CLIENT in any Adversary Proceedings. Representation in any Adversary Proceeding shall be billed on an hourly basis at the rate of \$175.00 per hour plus costs, and will require a separate agreement to be signed.
- 7. ATTORNEY agrees to accept employment by CLIENT in connection with the above matter on the basis above described and agrees to use his best efforts and perform all ethical services and acts which, in the judgement of ATTORNEY, are necessary and proper to enforce and protect the rights of CLIENT in connection with the above matter. ATTORNEY, however, cannot make and does not make any guarantee as to the result which will be obtained therein.
- 8. This contract is to be interpreted under the laws of the State of Illinois. If any provision of this contract is declared invalid, the remaining provisions of the contract shall not be affected thereby.

IN WITNESS WHEREOF the parties hereto have caused the above and foregoing ATTORNEY's Fee Contract to be executed the day and year first above written.

BY: 12 To CLIENT

Joseph R. Ramos

United States Bankruptcy Court Northern District of Illinois

In re	Donald A. Toutant		Case No.			
		Debtor(s)	Chapter	7		
	VE	RIFICATION OF CREDITOR MA	ATRIX			
	Number of Creditors:66					
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	February 15, 2017	/s/ Donald A. Toutant Donald A. Toutant Signature of Debtor				

Allied Collection Service, Inc. 4230 LBJ Freeway - Ste 407 Dallas, TX 75244-5809

APLM Ltd. 1050 W. Kinzie St. Chicago, IL 60642

Associate Pathologists of Joliet 39784 Treasury Ctr. Chicago, IL 60694-9700

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Aurora Emergency Associates P.O. Box 5990 Carol Stream, IL 60197

Aurora Radiology Consultants 520 E. 22nd St. Lombard, IL 60148

Bristol Bay Master Operating Assoc. 2205 Point Blvd. Ste 200 Elgin, IL 60123

Bristol Bay Town Home Assoc. 50 E.Commerce Dr. Schaumburg, IL 60173

Bristol Bay Townhome Assoc. 1901 Roselle Rd. Ste 1000 Schaumburg, IL 60195

Capital One 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One Po Box 30253 Salt Lake City, UT 84130 Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153

Carmax Auto Finance 12800 Tuckahoe Creek Pky Richmond, VA 23238

Cavalry Portfolio Services P.O. Box 27288
Tempe, AZ 85285-7288

Charles M. Keough, Esq. 114 E. Van Buren Naperville, IL 60540

Charles M. Keough, Esq. 114 E. Van Buren Naperville, IL 60540

Codillis & Asasociates, P.C. 15W030 North Frontage Rd. - Ste 100 Burr Ridge, IL 60527

Credit First N A 6275 Eastland Rd Brookpark, OH 44142

Credit First NA PO Box 81344 Cleveland, OH 44188-0344

Credit First NA 6275 Eastland Rd. Brook Park, OH 44142

Creditors Collection Bureau P.O. Box 63 Kankakee, IL 60901

Creditors Collection Bureau 755 Almar Pwy Bourbonnais, IL 60914

Creditors Collection Bureau 755 Almar Pwy Bourbonnais, IL 60914

Dependon Collection Services P.O. Box 4833 Hinsdale, IL 60522

Dynamic Recovery Solutions P.O. Box 25759 Greenville, SC 29616-0759

Earthmovers Cu 2195 Baseline Rd Oswego, IL 60543

Educational & Psychological Service 847 N. Center St. Naperville, IL 60563

Emergency Treatment, S.C. 900 Jorie Blvd. - Ste 200 Oak Brook, IL 60523

Emergency Treatment, S.C. 900 Jorie Blvd. - Ste 200 Oak Brook, IL 60523

Firstsource Financial Solutions P.O Box 33009 Phoenix, AZ 85067-3009

Firstsource Financial Solutions P.O Box 33009 Phoenix, AZ 85067-3009

G M A C 15303 S 94th Ave Orland Park, IL 60462 G M A C 15303 S 94th Ave Orland Park, IL 60462

J.b. Robinson Jewelers 375 Ghent Rd Fairlawn, OH 44333

Kendall County Circuit Court Clerk 807 W. John St. Yorkville, IL 60560

Kendall County Circuit Court Clerk 807 W. John St. Yorkville, IL 60560

Kendall County Circuit Court Clerk
807 W. Joun st.
Yorkville, IL 60560

Kendall County Circuit Court Clerk 807 W. Joun st. Yorkville, IL 60560

Mabt/contfin 121 Continental Dr Ste 1 Newark, DE 19713

MCS Collections, Inc. 725 S. Wells St. - Ste 501 Chicago, IL 60607

MCS Collections, Inc. 725 S. Wells St. - Ste 501 Chicago, IL 60607

Medical Recovery Speci 2250 E Devon Des Plaines, IL 60018

Medical Recovery Specialists, Inc. 2250 E. Devon Ave. Des Plaines, IL 60018

Mintex Inc. 800 West Fifth Ave. Suite 100A Naperville, IL 60563-4966

North Shore Agency 270 Spagnoli Rd. Melville, NY 11747

Northstar Location Services 4285 Genesee St. Buffalo, NY 14225-1943

Oswego Fire Protection P.O Box 457 Wheeling, IL 60090

Payment Processing Centers P.O. Box 9001952 Louisville, KY 40290-1952

Plainfield Fire Protection P.O. Box 457 Wheeling, IL 60090

Provena Mercy Mdical Center P.O. Box 88001 Chicago, IL 60680-1001

Provena Mercy Mdical Center P.O. Box 88001 Chicago, IL 60680-1001

Resident Colletct 4230 LBJ Freeway Ste. 407 Dallas, TX 75244

RIaz A. Baber M.D. 1460 Bond St. Ste.130 Naperville, IL 60563

Ridge Ambulanc Service 2252 Cornell Ave. Montgomery, IL 60538 Ridge Ambulance Service 1851 Aucutt Rd Montgomery, IL 60538

RPM Inc. P.O. Box 1548 Lynnwood, WA 98036-1548

Rush-Copley Medical Center P.O. Box 352 Aurora, IL 60507

Rush-Copley Medical Center P.O. Box 352 Aurora, IL 60507

Rush-Copley Medical Center P.O. Box 352 Aurora, IL 60507

Sprint
P.O. Box 4191
Carol Stream, IL 60197-4191

The WEoodlands of Crest Hill 1615 ARbor Lane Crest Hill, IL 60403

The Woodlands of Crest Hill 1615 Arbor Lane Crest Hill, IL 60403

U.S. Bank P.O Box 790408 Saint Louis, MO 63179-0084

United Recovery System P.O. Box 722929 Houston, TX 77272-2929

Us Bank 4325 17th Ave S Fargo, ND 58125